



Kentucky Agency for Substance Abuse Policy



Completing the Semi-Annual Rep0rt

Dates to Remember



The Reporting Period for the 1st Semi-Annual Report is:

★ **JULY 1, 2008 to DECEMBER 31, 2008**

**The DEADLINE to Submit the First Semi-Annual Report for State
Fiscal Year 2009 Funding is:**

★ **APRIL 21, 2009**

What To Do Before Completing the Semi-Annual Report



★ Grant Adjustment Notice Request – **if ANY** changes have occurred since the SFY2009 Award completion of the GAN is required prior to beginning the semi-annual report. Examples of changes requiring completion of the GAN include, budget modifications, officer changes, board member changes, workplan/timeline changes, etc.

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1. Three months into the grant the board secures an additional \$500 funding to help pay for curriculum for the local school system. Originally the board had budgeted \$1,000 for this purchase. With the additional funding the board can request a GAN to move the \$500 to another area. Once the board has decided to move the funds it needs to **immediately** submit the GAN for state approval for the movement.
2. Midway through the grant cycle the chairperson resigns and a new chairperson is appointed. The board should **immediately** submit the GAN so that the application can be modified and the state's records can be kept up-to-date!

What To Do Before Completing the Semi-Annual Report



IMPORTANT

If your RFP requested funding for “various mini-grants” or “mini-grants to-be-determined” and those mini-grants have been awarded **YOU MUST** complete the grant adjustment notice request and then add those mini-grants to the application pages.

STEP I

Login – www.kyjusticegms.com



KENTUCKY JUSTICE & PUBLIC SAFETY CABINET

Welcome to the Kentucky Justice and Public Safety Cabinet's Electronic Grants Management System. This system was designed to help both grant applicants and staff to more effectively organize and manage grant related information.

With close to 8,000 employees, the Kentucky Justice and Public Safety Cabinet (JPSC) is the second largest agency in state government.

It is the state entity responsible for criminal justice services which encompass law enforcement and training; prevention-education and treatment involving substance abuse; adult and juvenile incarceration; autopsies, death certifications and toxicology analyses; special investigations; paroling of eligible convicted felons; and long range planning and recommendations on statewide criminal justice reform issues.

As a national leader in criminal justice, the Justice and Public Safety Cabinet's vision is to continuously improve public safety and the quality of life.

HELP:

For general assistance with this site, program related questions or help obtaining a username/password please call your grant administering agency listed below:

Please View our Gaining Access [Training Video](#)

Grants Management Branch, Office of the Secretary	(502) 564-3251
Office of Drug Control Policy, Office of the Secretary	(502) 564-9564
Department of Juvenile Justice	(502) 573-2738, Ext. 303 - Title II
	(502) 573-2738, Ext. 480 - JABG
	(502) 429-7725 - Title V
Department of Corrections	(502) 564-7290
Kentucky State Police	(502) 695-6300
Kentucky Vehicle Enforcement	(502) 564-3276

Please [click here to review the system requirements](#).

LOGIN

Username

Password


LOGIN

[New User?](#) [Forgot Password?](#)

Login here

STEP II

Open Application

**KENTUCKY
JUSTICE & PUBLIC
SAFETY CABINET**

User:

Main Menu

MY DOCUMENTS

Use the tree system below to view all your documents associated with a particular display filter. Selecting the '+' will expand the view under each folder. Use the drop-down box to filter your documents.

Show

- Agency for Substance Abuse Policy Grant
 - ASAP-Local County-00025
- Community Corrections Grant 2009
 - Create New Community Corrections Grant 2009

SYSTEM INFORMATION

- System Administrative Links
 - Training Videos
 - Proposal Completion & Submission
 - Adding Users
 - Manuals
 - Subgrantee User Guide

MY INFORMATION

Name

Title

Address

Phone Number

Email Address

Username

[View/Edit My Information](#)

MY ORGANIZATIONS**MY MESSAGES**

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Click here

STEP III

Create the Semi-Annual Report

KENTUCKY JUSTICE & PUBLIC SAFETY CABINET

Main Menu | Proposal Menu
Main Menu ▾

Organization: **Office of Drug Control** **ASAP:** **Award Approved**
Status: **Due:** 5/1/2008 4:30:00 PM EST
Period: 7/1/2008 to 6/30/2009

STATUS MANAGEMENT
Next Possible Statuses:
GAN Justification Submitted ▾
CHANGE STATUS

MANAGEMENT ACTIVITIES

- Training Videos
- Proposal Completion & Submission
- Adding Users
- Manuals
- Subgrantee User Guide
- Administrative Links
- Add/Edit Organizations
- Add/Edit People
- Check for Errors
- Status History
- Date Modification Request
- View Modification History
- Document Availability
- Manage Review Process
- View Full PDF

RELATED ITEMS

- Semi-Annual Reports - ASAP
- Agency for Substance Abuse Policy - Semi-Annual Reports 2008

FORMS

- General Information (1)
- Contact Information (1)
- Area Served (1)
- Certifications (1)
- Instructions/Guidelines
- Terms & Conditions (1)
- Personnel & Fringe (1)
- General Supplies (1)
- Travel & Training (1)
- Equipment (1)
- Other (1)
- Mini Grant Programs (if applicable) (1)
- Evaluation (1)
- Direct Program Cost (1)
- Occupancy Rent Cost (1)
- Budget Summary (1)
- Budget Narrative (1)
- Board Membership List (1)
- Permanent Board Members (1)
- Proposal Narrative (1)
- Attachments
- Award Binders
- Award Binder (1)
- Grant Adjustment Notices (GAN)
- GAN Instructions
- GAN Adjustment Notice Request
- Application Comments
- Staff Comments

Click here

STEP III

Create the Semi-Annual Report

MANAGEMENT ACTIVITIES

- Training Videos
 - Proposal Completion & Submission
 - Adding Users
- Manuals
 - Subgrantee User Guide
- Administrative Links
 - Add/Edit Organizations
 - Add/Edit People
 - Check for Errors
 - Status History
 - Date Modification Request
 - View Modification History
 - Document Availability
 - Manage Review Process
 - View Full PDF

RELATED ITEMS

- Semi-Annual Reports - ASAP
 - Agency for Substance Abuse Policy - Semi-Annual Reports 2008
 - Semi-Annual Report 1
 - Semi-Annual Report 2

1. Click here

- Mini Grant Programs (if applicable) (1)
- Evaluation (1)
- Direct Program Cost (1)
- Occupancy Rent Cost (1)
- Budget Summary (1)
- Budget Narrative (1)
- Board Membership List (1)
 - Permanent Board Members (1)
- Proposal Narrative (1)
- Attachments
- Award Binders
 - Award Binder (1)
- Grant Adjustment Notices (GAN)
 - GAN Instructions


RELATED ITEMS

- Semi-Annual Reports - ASAP
 - Agency for Substance Abuse Policy - Semi-Annual Reports 2008
 - Semi-Annual Report 1
 - Create New
 - Semi-Annual Report 2

2. Click here

STEP III

Create the Semi-Annual Report



KENTUCKY
JUSTICE & PUBLIC
SAFETY CABINET

Main Menu ▶ Actions ▶ Office of Drug Control Policy - ASAP Menu ▶


Are you sure you want to complete this Semi-Annual Report for Kentucky ASAP?

I AGREE **I DO NOT AGREE**

Click here

STEP III

Create the Semi-Annual Report

**KENTUCKY
JUSTICE & PUBLIC
SAFETY CABINET**

Your Board's Information

[Main Menu](#) | [Proposal Menu](#)

Main Menu ▶

INFORMATION

Organization: [Your Board's Information](#)

Semi-Annual Reports - [ASAP](#)

Status: [Semi-Annual Report in Progress](#)

Office of Drug Control Policy [ASAP](#)

Due: [12/31/2009](#)

Period: [1/1/2009 to 12/1/2009](#)

ADD NOTE

STATUS MANAGEMENT

Next Possible Statuses:

[Semi-Annual Report Submitted](#)

CHANGE STATUS

MANAGEMENT ACTIVITIES

[Training Videos](#)

[Proposal Completion & Submission](#)

[Adding Users](#)

[Manuals](#)

[Subgrantee User Guide](#)

FORMS

[Instructions and Attachments](#)

[Financial Report \(1\)](#)

[Mini Grant Programs \(1\)](#)

[Additional Funding/In-Kind Resources](#)

[Performance Report/Work Plan Timeline](#)

1. Click here

STEP IV

Instructions & Attachment Page



KENTUCKY
JUSTICE & PUBLIC
SAFETY CABINET

Your Board's Information

Main Menu ▾ Actions ▾ Semi-Annual Reports - ASAP Menu ▾

SAVE

DELETE

VIEW PDF

INSTRUCTIONS AND ATTACHMENTS

Instructions:

- Required fields are marked with a ★.
- When you are finishing filling out this page, please click **SAVE**. You must **SAVE** before proceeding or you will lose data.

General Information: If any changes have occurred since RFP submission, you **MUST** submit the changes utilizing the Grant Adjustment Notice (GAN). Once the GAN has been submitted and approved your original application pages will open for you to go in and make adjustments.

Contact Information: If any changes have occurred since RFP submission, you **MUST** submit the changes utilizing the Grant Adjustment Notice (GAN). Once the GAN has been submitted and approved your original application pages will open for you to go in and make adjustments.

Board Membership List: If any changes have occurred since RFP submission, you **MUST** submit the changes utilizing the Grant Adjustment Notice (GAN). Once the GAN has been submitted and approved your original application pages will open for you to go in and make adjustments. **REMEMBER** all individuals listed on the officer's page must also be included in the membership list. When reviewing your board membership be cognizant of the 10% rule as written in the legislation: 10 KAR 7:010 Section 3. (7) "Representatives appointed under any paragraph in this section, excluding subsection (5) (a) (Judge/Executive) of this section, shall not comprise more than ten (10) percent of the total board membership." and Section 3. (8) "Representation from health departments and community mental health centers shall be equivalent." Local Boards with membership rosters that do not adhere to Section 3, (7) and (8) will be deemed out of compliance with state regulations. An example of a local board out of compliance would be one that has more than two (2) members representing any one group/agency. For example, permanent membership calls for representation of the Family Resource Center.

**READ THIS PAGE
COMPLETELY**

STEP IV

Instructions & Attachments (cont.)

Therefore, only one additional person may represent that group.

Does your local school system (s) participate in the KIP Survey?
☐ Yes ☐ No

1. Schools Participate in KIP?
Click Yes or No

If so, please upload a copy of the letter from the Superintendent of Schools that allows your KY-ASAP local board access to the KIP Data.

Browse...

2. ATTACH KIP LETTER

ATTACHMENTS: You **MUST** attach a copy of the local board meeting minutes for any meeting held from July 1, 2008 to January 1, 2009. Included with the meeting minutes must be the attendance and a statement of quorum for each meeting. Please attach each meeting minutes as a separate document.

Browse...
 Browse...
 Browse...
 Browse...
 Browse...
 Browse...

3. ATTACH A COPY OF MEETING MINUTES & ATTENDANCE LOGS FOR ALL MEETINGS HELD FROM JULY 1, 2008 to DECEMBER 31, 2008

Description:
 Browse...

Description:
 Browse...

4. ATTACH OTHER SUPPORTING DOCUMENTATION HERE (if any)

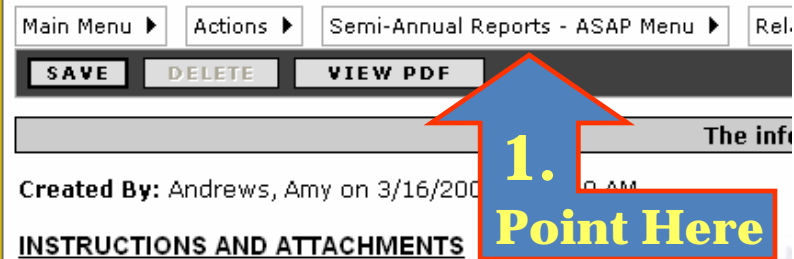
5. YOU MUST CLICK THE SAVE BUTTON
Click here

AFTER SAVING – SCROLL BACK TO THE TOP OF THIS PAGE

SCROLL TO TOP OF PAGE

STEP V

Financial Report



Main Menu ▾ Actions ▾ Semi-Annual Reports - ASAP Menu ▾ Rel.

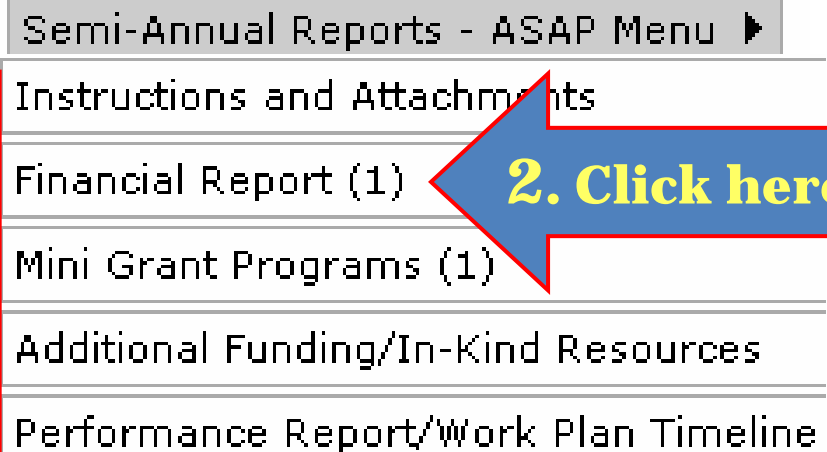
SAVE **DELETE** **VIEW PDF**

The info

Created By: Andrews, Amy on 3/16/2008 10:41 AM

INSTRUCTIONS AND ATTACHMENTS

AFTER SCROLLING TO THE TOP OF THE INSTRUCTIONS PAGE – POINT THE MOUSE AT THE SEMI-ANNUAL REPORTS – ASAP MENU TAB AND THE FORMS DROPDOWN MENU WILL APPEAR



Semi-Annual Reports - ASAP Menu ▾

Instructions and Attachments

Financial Report (1)

Mini Grant Programs (1)

Additional Funding/In-Kind Resources

Performance Report/Work Plan Timeline

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!

Summary of Approved Budget	Prevention	Treatment	Enforcement	Administration	Total
Personnel & Fringe	N/A	N/A	N/A	N/A	\$3,000.00
General Supplies	\$6,762.00	\$0	\$0	\$0	\$6,762.00
Travel & Training	\$1,338.00	\$0	\$0	\$0	\$1,338.00
Equipment	\$0	\$0	\$0	\$0	\$0
Other					
Mini Grant Programs	\$5,500.00	\$0	\$0	\$0	\$5,500.00
Evaluation					
Direct Program Costs	\$0				\$0
Occupancy Rent Costs	\$0				\$0
Total Funds Requested	\$13,600.00	\$0	\$0	\$0	\$16,600.00

A Summary of SFY2009 Approved Expenditures is Provided for Your Convenience

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your Personnel Request below

Description	Prevention	Treatment	Enforcement	Administration	Total
	N/A	N/A	N/A	N/A	\$3,000.00
john smith					\$1,500.00
jane helper					\$400.00
Current Expenditure					\$1,900.00
Expended to Date					
Balance					\$1,100.00

1. ENTER TOTAL AMOUNT EXPENDED FOR PERSONNEL FROM JULY 1, 2008 THROUGH DECEMBER 31, 2008

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your General Supplies Request below

Description	Prevention	Treatment	Enforcement	Administration	Total
	\$6,762.00	\$0	\$0	\$0	\$6,762.00
paper	\$400.00				\$400.00
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Current Expenditure	\$400.00	\$0	\$0	\$0	\$400.00
Expended to Date					
Balance	\$6,362.00	\$0	\$0	\$0	\$6,362.00

1. ENTER TOTAL AMOUNT EXPENDED FOR SUPPLIES FROM JULY 1, 2008 THROUGH DECEMBER 31, 2008

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your Travel & Training Request below

Description	Prevention	Treatment	Enforcement	Administration	Total
	\$1,338.00	\$0	\$0	\$0	\$1,338.00
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Current Expenditure	\$0	\$0	\$0	\$0	\$0
Expended to Date					
Balance	\$1,338.00	\$0	\$0	\$0	\$1,338.00

1. ENTER TOTAL AMOUNT EXPENDED FOR TRAVEL/TRAINING FROM JULY 1, 2008 THROUGH DECEMBER 31, 2008

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your Equipment Request below

Description	Prevention \$0	Treatment \$0	Enforcement \$0	Administration \$0	Total \$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Current Expenditure	\$0	\$0	\$0	\$0	\$0
Expended to Date					
Balance	\$0	\$0	\$0	\$0	\$0

1. ENTER TOTAL AMOUNT EXPENDED FOR EQUIPMENT FROM JULY 1, 2008 THROUGH DECEMBER 31, 2008

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your Other Request below

Description	Prevention \$0	Treatment \$0	Enforcement \$0	Administration \$0	Total \$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Current Expenditure	\$0	\$0	\$0	\$0	\$0
Expended to Date					
Balance	\$0	\$0	\$0	\$0	\$0

1. ENTER TOTAL AMOUNT EXPENDED FOR OTHER FROM JULY 1, 2008 THROUGH DECEMBER 31, 2008

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your Mini Grants Request below

Description	Prevention	Treatment	Enforcement	Administration	Total
	\$5,500.00	\$0	\$0	\$0	\$5,500.00
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Current Expenditure	\$0	\$0	\$0	\$0	\$0
Expended to Date					
Balance	\$5,500.00	\$0	\$0	\$0	\$5,500.00

1. ENTER TOTAL AMOUNT EXPENDED FOR MINI-GRANTS FROM JULY 1, 2008 THROUGH DECEMBER 31, 2008

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your Evaluation Request below

Description	Prevention \$0	Treatment \$0	Enforcement \$0	Administration \$0	Total \$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Current Expenditure Expended to Date	\$0	\$0	\$0	\$0	\$0
Balance	\$0	\$0	\$0	\$0	\$0

**1. ENTER TOTAL
AMOUNT
EXPENDED FOR
EVALUATION
FROM JULY 1,
2008 THROUGH
DECEMBER 31,
2008**

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your Direct Program Costs Request below

Description	Prevention \$0	Treatment \$0	Enforcement \$0	Administration \$0	Total \$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Current Expenditure	\$0	\$0	\$0	\$0	\$0
Expended to Date					
Balance	\$0	\$0	\$0	\$0	\$0

1. ENTER TOTAL AMOUNT EXPENDED FOR DIRECT PROGRAM FROM JULY 1, 2008 THROUGH DECEMBER 31, 2008

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP V

Financial Report (cont.)

EACH CATEGORY BOX (*Personnel, Supplies, Travel/Training, Equipment, Other, Mini-Grants, Evaluation, Direct Program, Rent*) **MUST BE COMPLETED IF EXPENDITURES HAVE BEEN MADE IN THOSE CATEGORIES UTILIZING SFY2009 FUNDING DURING THE TIME PERIOD JULY 1, 2008 THROUGH DECEMBER 31, 2008!**

Please enter your Occupancy Rent Costs Request below

Description	Prevention \$0	Treatment \$0	Enforcement \$0	Administration \$0	Total \$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Current Expenditure	\$0	\$0	\$0	\$0	\$0
Expended to Date					
Balance	\$0	\$0	\$0	\$0	\$0

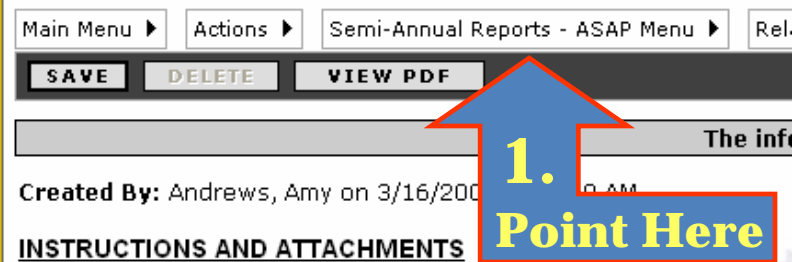
1. ENTER TOTAL AMOUNT EXPENDED FOR RENT FROM JULY 1, 2008 THROUGH DECEMBER 31, 2008

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP VI

Mini-Grant Programs



Main Menu ▾ Actions ▾ Semi-Annual Reports - ASAP Menu ▾ Rel.

SAVE **DELETE** **VIEW PDF**

The info

Created By: Andrews, Amy on 3/16/200

INSTRUCTIONS AND ATTACHMENTS

AFTER SCROLLING TO THE TOP OF THE FINANCIAL REPORT PAGE – POINT THE MOUSE AT THE SEMI-ANNUAL REPORTS – ASAP MENU TAB AND THE FORMS DROPDOWN MENU WILL APPEAR

- Semi-Annual Reports - ASAP Menu ▾
- Instructions and Attachments
- Financial Report (1)
- Mini Grant Programs (1)
- Additional Funding/In-Kind Resources
- Performance Report/Work Plan Timeline

2. Click here

STEP VI

Mini-Grant Programs (cont.)

MINI GRANT PROGRAMS

- Please click the **ADD** button at the top of the page to create additional pages. After you have **SAVED** the second page, a box will appear at the top of your screen, on the right side, with a list of the pages that you have entered. Choose the page you want to go to from the dropdown list, click the "GO" button to the right to access the selected page.

Mini-Grants for RFPs that simply requested to fund various mini-grants that were unknown at the time of RFP **MUST** include both the amount expended, the recipient of the mini-grant (purpose of mini-grant should also been included in the Budget Narrative). Please note that prior approval by the State KY-ASAP office should have been received prior to the actual funding of these types of mini-grants - if the local board has not submitted documentation of the actual mini-grant application you must upload a copy of that application in the box provided below.

STEP VI

Mini-Grant Programs (cont.)

Mini Grantee	Program Description	Prevention	Treatment	Enforcement	Administration	Total
To Be Determines	Misc. Grants	\$10,000.00	\$3,880.00	\$2,000.00		\$15,880.00
health depts.	Anti-Smoking Program	\$4,000.00	\$3,000.00			\$7,000.00
school ATOD progr	Anti-Smoking Program	\$4,000.00	\$3,000.00			\$7,000.00
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
Totals		\$18,000.00	\$9,880.00	\$2,000.00	\$0	\$29,880.00

**A Summary of SFY2009 Approved
Mini-Grant Budget is Provided for
Your Convenience**

STEP VI

Mini-Grant Programs (cont.)

Mini Grantee	Program Description	Prevention	Treatment	Enforcement	Administration	Total
health dept.	smoking cessation		\$2,000.00			\$2,000.00
County Schools	ATOD program	\$2,000.00				\$2,000.00
sheriff dept.	DUI Checkpoints			\$1,000.00		\$1,000.00
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
Total						\$5,000.00

**If Additional
Lines are needed
please scroll to the
bottom of page
and click on the
“Add” button!**

SAVE

**2. Scroll to Bottom of Page and click SAVE – EACH
SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!**

STEP VI

Mini-Grant Programs (cont.)

Please attach supporting documents.
For example: Copies of evaluations,
survey, post activity report receipts,
etc.

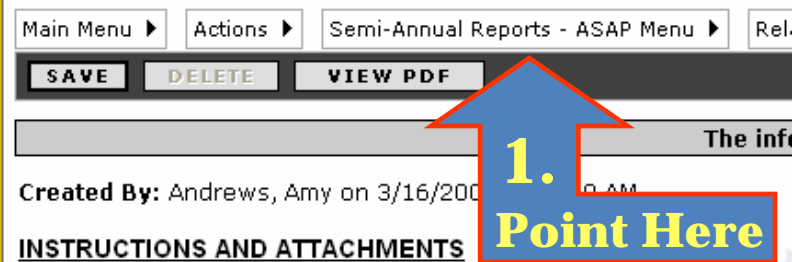
<input type="text"/>	<input type="button" value="Browse..."/>
<input type="text"/>	<input type="button" value="Browse..."/>
<input type="text"/>	<input type="button" value="Browse..."/>
<input type="text"/>	<input type="button" value="Browse..."/>
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<input type="text"/>	<input type="button" value="Browse..."/>
<input type="text"/>	<input type="button" value="Browse..."/>
<input type="text"/>	<input type="button" value="Browse..."/>
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<input type="text"/>	<input type="button" value="Browse..."/>
<input type="text"/>	<input type="button" value="Browse..."/>

1. Attach any supporting documents, (i.e. copies of program evaluations, surveys, post activity reports, receipts, etc.)

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP VII

Additional Funding/In-Kind Resources



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SAVE DELETE VIEW PDF

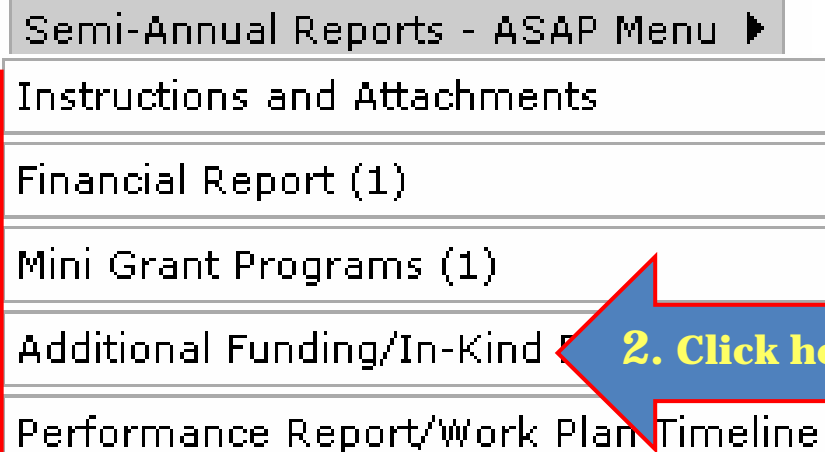
The info

Created By: Andrews, Amy on 3/16/2008 10:41 AM

INSTRUCTIONS AND ATTACHMENTS

1. Point Here

AFTER SCROLLING TO THE TOP OF THE MINI-GRANT PAGE – POINT THE MOUSE AT THE SEMI-ANNUAL REPORTS – ASAP MENU TAB AND THE FORMS DROPDOWN MENU WILL APPEAR



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Instructions and Attachments

Financial Report (1)

Mini Grant Programs (1)

Additional Funding/In-Kind

Performance Report/Work Plan Timeline

2. Click here

STEP VII

Additional Funding/In-Kind Resources

(cont.)

ADDITIONAL FUNDING/IN-KIND RESOURCES

Other Funding Sources: Please list any additional funding sources. The information supplied is for informational purposes only and will not be used in consideration of funding (including in-kind donations).

*If you have Carry Over Funds, list them here.

[illegible]

CARRY-OVER!!

YOU MUST SUPPLY THE TOTAL OF ALL CARRY-OVER FUNDS – i.e. ANY FUNDING YOU HAVE RECEIVED FROM ODCP/KY-ASAP FOR START-UP FUNDING, AND ANNUAL ALLOCATIONS DURING PREVIOUS FISCAL YEARS.

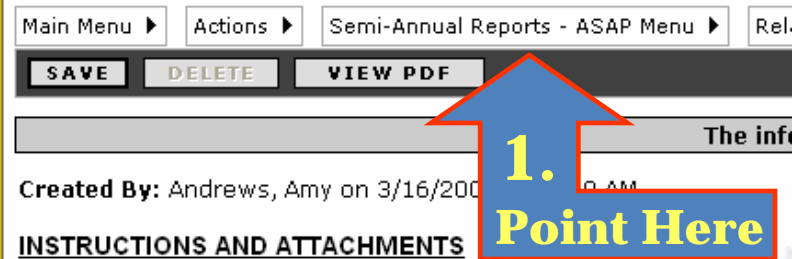
Also, list any additional funding you receive – i.e. drug free communities, in-kind donations, etc.

SAVE

2. Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

STEP VIII

Performance Report/Work Plan Timeline



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SAVE DELETE VIEW PDF

The info

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INSTRUCTIONS AND ATTACHMENTS

1. Point Here

AFTER SCROLLING TO THE TOP OF THE ADDITIONAL FUNDING PAGE – POINT THE MOUSE AT THE SEMI-ANNUAL REPORTS – ASAP MENU TAB AND THE FORMS DROPDOWN MENU WILL APPEAR

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Instructions and Attachments

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Additional Funding/In-Kind Resources

Performance Report/Work Plan Timeline

2. Click here

STEP VIII

Performance Report/Work Plan Timeline

PERFORMANCE REPORT/WORK PLAN TIMELINE

Instructions

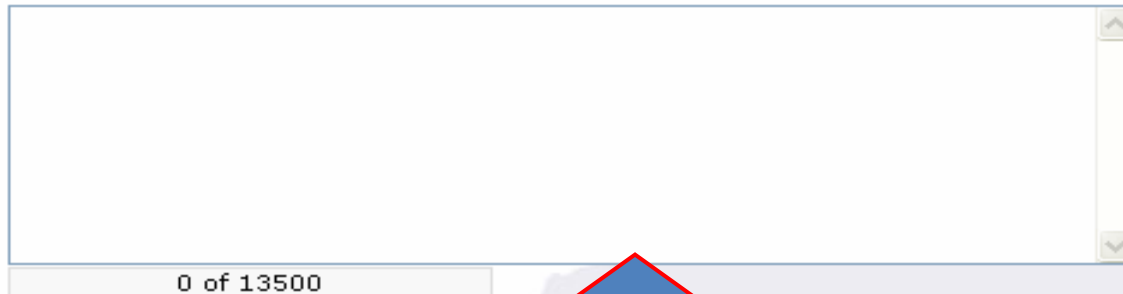
- For your convenience, below is the original proposal narrative you provided in your FY09 RFP.
- Please provide information describing accomplishments made in furtherance of the original proposal narrative in the text box provided.

A SUMMARY OF YOUR PROPOSAL NARRATIVE WILL AUTOMATICALLY PULL INTO THIS PAGE – PLEASE REFER TO YOUR ORIGINAL PROPOSAL NARRATIVE WHEN COMPLETING THIS SECTION

STEP VIII

Performance Report/Work Plan Timeline (cont.)

Provide information describing accomplishments made in furtherance of the original Proposal Narrative above.



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USING THE ORIGINAL PROPOSAL NARRATIVE, PLEASE PROVIDE INFORMATION DESCRIBING THE ACCOMPLISHMENTS MADE TOWARD FULFILLING THOSE THINGS DISCUSSED IN THE ORIGINAL NARRATIVE.

SAVE

**Scroll to Bottom of Page and
click SAVE – EACH SAVE
TAKES ABOUT 20 SECONDS
– BE PATIENT!**

STEP VIII

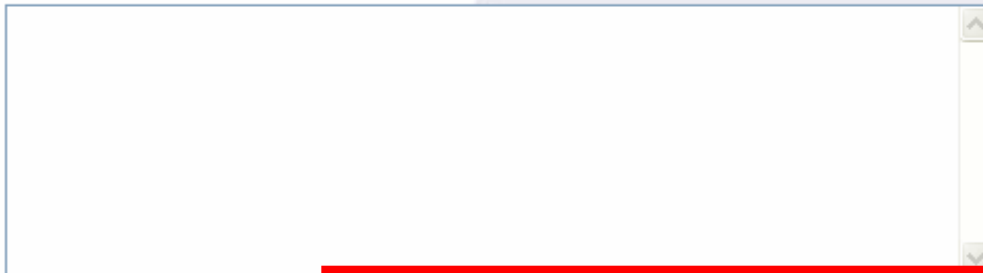
Performance Report/Work Plan Timeline

(cont.)

Scroll Down

A SUMMARY OF YOUR WORKPLAN/TIMELINE WILL AUTOMATICALLY PULL INTO THIS PAGE – PLEASE REFER TO YOUR ORIGINAL WHEN COMPLETING THIS SECTION

Please indicate what has been accomplished to the workplan and timeline. If additional work not included in the original SFY2009 Request for Proposal has been completed please use this area to state that additional work. In addition to listing each completed task, please explain the outcome associated with the task; i.e. 24 people successfully completed Cooper Clayton classes.



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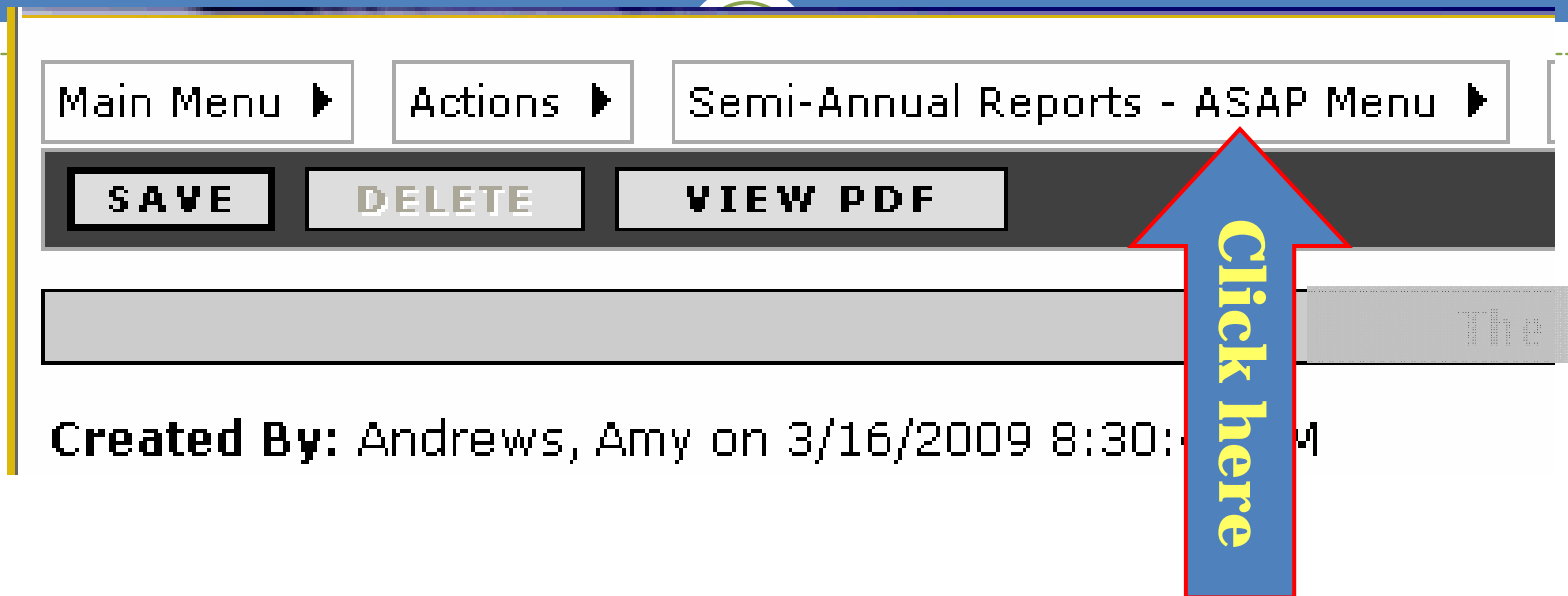
SAVE

Scroll to Bottom of Page and click SAVE – EACH SAVE TAKES ABOUT 20 SECONDS – BE PATIENT!

USING THE ORIGINAL WORKPLAN/TIMELINE, PLEASE PROVIDE INFORMATION DESCRIBING WHAT HAS BEEN DONE DURING THE REPORTING PERIOD – AND PLAN TO COMPLETE REMAINING ITEMS PRIOR TO JUNE 30, 2009

STEP IX

Submitting the Semi-Annual Report

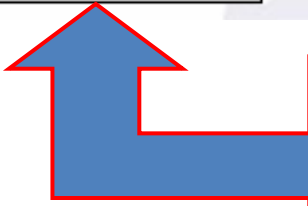


AFTER SCROLLING TO THE TOP OF THE PERFORMANCE/WORKPLAN TIMELINE PAGE –CLICK ON THE SEMI-ANNUAL REPORTS – ASAP MENU TAB TO RETURN TO THE FIRST PAGE

STEP IX

Submitting the Semi-Annual Report

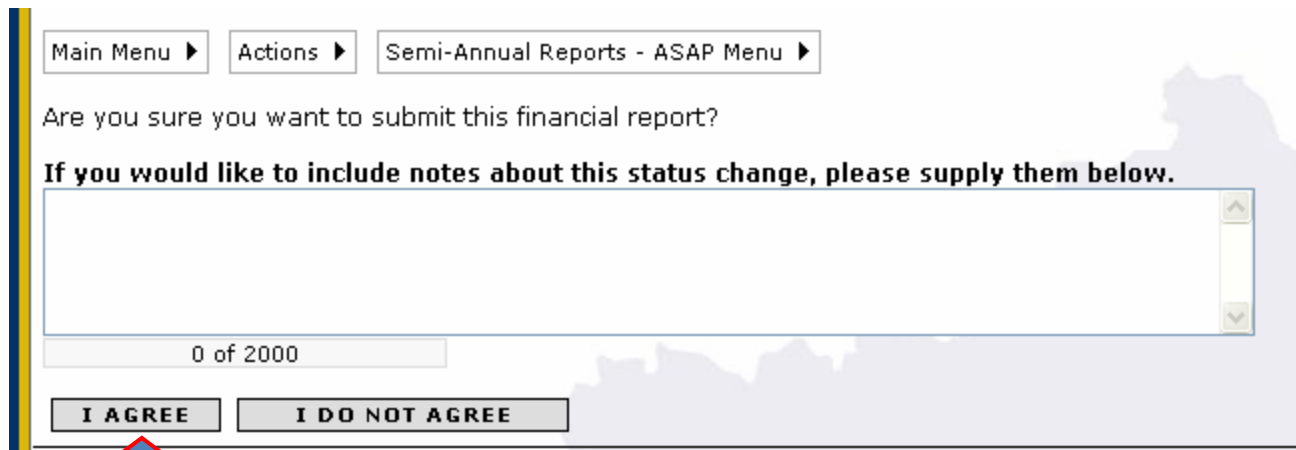
INFORMATION		FORMS	
Organization:	Your Board's Information	Instructions and Attachments	
Semi-Annual Reports - ASAP:		Financial Report (1)	
Status:		Mini Grant Programs (1)	
Office of Drug Control Policy - ASAP		Additional Funding/In-Kind Resources	
Due:	12/1/2009 12:00:00 PM EST	Performance Report/Work Plan Timeline (1)	
Period:	1/1/2009 to 12/1/2009		
<input type="button" value="ADD NOTE"/>			
STATUS MANAGEMENT			
Next Possible Statuses:			
<input type="text" value="Semi-Annual Report Submitted"/> <input type="button" value="v"/>			
<input type="button" value="CHANGE STATUS"/>			



**CLICK ON THE
CHANGE STATUS
BUTTON**

STEP IX

Submitting the Semi-Annual Report



Main Menu ▶ Actions ▶ Semi-Annual Reports - ASAP Menu ▶

Are you sure you want to submit this financial report?

If you would like to include notes about this status change, please supply them below.

0 of 2000



**CLICK ON THE “I
AGREE” BUTTON**

**Semi-Annual Report
Completed!**

Kentucky Agency for Substance Abuse Policy



Questions?

Contact State Coordinator Amy Andrews

502-564-8293 or amy.andrews@ky.gov

